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CONFIRMATION NO. 5015

Bib Data Sheet

SERIAL NUMBER 10/003,553	FILING DATE 10/24/2001 RULE	CLASS 379	GROUP ART UNIT 2643	ATTORNEY DOCKET NO. 00680365
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APPLICANTS

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** CONTINUING DATA *NONE TP*

** FOREIGN APPLICATIONS *NONE TP*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 01/02/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IL	SHEETS DRAWING 2	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 3
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Verified and Acknowledged *[Signature]* *TP*
 Examiner's Signature Initials

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TITLE
 Automatic longitudinal balance for solid state DAAs

FILING FEE RECEIVED 435	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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